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10 **BEFORE THE**  
11 **BOARD OF REGISTERED NURSING**  
12 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

13 In the Matter of the Petition to Revoke Probation  
Against:

14 MARGUERITE ROSE PELLETIER, a.k.a.  
15 MARGUERITE ROSE PELLETIER LONG  
1343 Morning View Drive, Apt. #444  
16 Escondido, California 92026

17 Registered Nurse License No. 217104

18 Respondent.

Case No. 2004-203

**DEFAULT DECISION  
AND ORDER**

[Gov. Code, §11520]

20 FINDINGS OF FACT

21 1. On or about August 13, 2007, Complainant Ruth Ann Terry, M.P.H, R.N,  
22 in her official capacity as the Executive Officer of the Board of Registered Nursing, Department  
23 of Consumer Affairs, filed Petition to Revoke Probation No. 2004-203 against Marguerite Rose  
24 Pelletier a.k.a. Marguerite Rose Pelletier Long (Respondent) before the Board of Registered  
25 Nursing.

26 2. On or about July 31, 1971, the Board of Registered Nursing issued  
27 Registered Nurse License Number 217104 to Respondent. The license expired on August 31,  
28 2007 and has not been renewed.

1                   3.       On or about August 22, 2007, Denise Hosman, an employee of the  
2 Department of Justice, served by Certified and First Class Mail a copy of Petition to Revoke  
3 Probation No. 2004-203 (Petition), Statement to Respondent, Notice of Defense, Request for  
4 Discovery, and Government Code sections 11507.5, 11507.6, and 11507.7 to Respondent's  
5 address of record with the Board, which was and is 1343 Morning View Drive, Apt. #444,  
6 Escondido, California 92026. A copy of the Petition, the related documents, and Declaration of  
7 Service are attached as Exhibit A, and are incorporated herein by reference.

8                   4.       Service of the Petition was effective as a matter of law under the  
9 provisions of Government Code section 11505, subdivision (c).

10                  5.       Government Code section 11506 states, in pertinent part:

11                       (c) The respondent shall be entitled to a hearing on the merits if the  
12 respondent files a notice of defense, and the notice shall be deemed a specific  
13 denial of all parts of the accusation not expressly admitted. Failure to file a notice  
of defense shall constitute a waiver of respondent's right to a hearing, but the  
agency in its discretion may nevertheless grant a hearing.

14                  6.       Respondent failed to file a Notice of Defense within 15 days after service  
15 upon her of the Petition, and therefore waived her right to a hearing on the merits of Petition No.  
16 2004-203.

17                  7.       California Government Code section 11520 states, in pertinent part:

18                       (a) If the respondent either fails to file a notice of defense or to appear at  
19 the hearing, the agency may take action based upon the respondent's express  
20 admissions or upon other evidence and affidavits may be used as evidence without  
any notice to respondent.

21                  8.       Pursuant to its authority under Government Code section 11520, the Board  
22 finds Respondent is in default. The Board will take action without further hearing and, based on  
23 Respondent's express admissions by way of default and the evidence before it, contained in  
24 Exhibits A and B, finds that the allegations in Petition No. 2004-203 are true.

25                  9.       The total costs for investigation and enforcement are \$1,224.50 as of  
26 October 9, 2007. See Certification of Costs: Declaration of Rita M. Lane attached hereto as  
27 Exhibit B and incorporated herein by reference.

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DETERMINATION OF ISSUES

1  
2           1.     Based on the foregoing findings of fact, Respondent has subjected her  
3 registered nurse license to discipline.

4           2.     A copy of the Petition and the related documents and Declaration of  
5 Service are attached.

6           3.     The agency has jurisdiction to adjudicate this case by default.

7           4.     The Board of Registered Nursing is authorized to revoke Respondent's  
8 registered nurse license based upon the following violations alleged in the Petition:

9           a.     Respondent's probation is subject to revocation for failure to comply with  
10 Probation Condition 2, in that Respondent failed to fully comply with probation terms  
11 and conditions 2, 13, 14 and 15.

12          b.     Respondent's probation is subject to revocation for failure to comply with  
13 Probation Condition 13, in that Respondent failed to participate in a  
14 treatment/rehabilitation program.

15          c.     Respondent's probation is subject to revocation for failure to comply with  
16 Probation Condition 14, referenced above, in that Respondent failed to abstain from  
17 mood altering drugs by her own admission of relapsing on or about June 7, 2004 through  
18 June 11, 2004, August 14, 2004 through August 20, 2004 and on or about August of 2006  
19 through September 28, 2006. Additionally, Respondent tested positive for narcotic drugs  
20 without a prescription on the following dates: February 26, 2007, February 23, 2007,  
21 January 18, 2007, October 12, 2006, July 31, 2006, April 25, 2006, April 13, 2006,  
22 March 24, 2006, February 22, 2006, February 7, 2006, January 19, 2006, December 8,  
23 2005, October 26, 2005, October 19, 2005, January 4, 2005, December 6, 2004, July 29,  
24 2004, March 8, 2004, January 21, 2004, January 6, 2004 and December 23, 2003.

25          d.     Respondent's probation is subject to revocation for failure to comply with  
26 Probation Condition 15, in that Respondent has failed to submit to biological fluid  
27 testings on December 7, 2006, September 6, 2006, August 3, 2006, November 1, 2005  
28 and June 14, 2004.

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ORDER

IT IS SO ORDERED that Registered Nurse License No. 217104 heretofore issued to Respondent, is revoked.

Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective on February 2, 2008.

It is so ORDERED January 3, 2008

*LaTranene N Tate*

FOR THE BOARD OF REGISTERED NURSING  
DEPARTMENT OF CONSUMER AFFAIRS

80170297.wpd  
DOJ docket number:SD2006800366

Attachments:

Exhibit A: Petition No. 2004-203, Related Documents, and Declaration of Service  
Exhibit B: Certification of Costs: Declaration of Rita M. Lane

Exhibit A

Petition to Revoke Probation No. 2004-203,  
Related Documents and Declaration of Service

1 EDMUND G. BROWN JR., Attorney General  
of the State of California

2 MARGARET A. LAFKO  
Supervising Deputy Attorney General

3 RITA M. LANE, State Bar No. 171352  
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9 Attorneys for Complainant

10 **BEFORE THE**  
11 **BOARD OF REGISTERED NURSING**  
12 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

13 In the Matter of the Petition to Revoke Probation  
14 Against:

Case No. 2004-203

15 **MARGUERITE ROSE PELLETIER, a.k.a.**  
16 **MARGUERITE ROSE PELLETIER LONG**  
1343 Morning View Drive, Apt. #444  
Escondido, California 92026

**PETITION TO REVOKE  
PROBATION**

17 Registered Nurse License No. 217104

18 Respondent.

19  
20 Ruth Ann Terry, M.P.H., R.N. ("Complainant") alleges:

21 **PARTIES**

22 1. Complainant brings this Petition to Revoke Probation solely in her official  
23 capacity as the Executive Officer of the Board of Registered Nursing ("Board"), Department of  
24 Consumer Affairs.

25 2. On or about July 31, 1971, the Board issued Registered Nurse License  
26 Number 217104 to Marguerite Rose Pelletier, also known as Marguerite Rose Pelletier Long  
27 ("Respondent"). The license expires on August 31, 2007, unless renewed.

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1                   **Prior Discipline**

2                   3.       Respondent's initial Registered Nurse License was revoked effective  
3 June 16, 1997. Thereafter, Respondent filed a petition for reinstatement with the Board.  
4 Effective August 30, 2003, Respondent's petition for reinstatement was granted, pursuant to the  
5 Decision in OAH Case No. N2003060016. Respondent's Registered Nurse License was issued,  
6 then immediately revoked. The revocation was stayed and Respondent was placed on probation  
7 for a period of five (5) years with certain terms and conditions. A copy of the Decision is  
8 attached hereto as **Exhibit A** and is incorporated herein by reference. Respondent's license is  
9 currently on probation.

10                                   **JURISDICTION**

11                   4.       Business and Professions Code ("Code") section 2750 provides, in  
12 pertinent part, that the Board may discipline any licensee, including a licensee holding a  
13 temporary or an inactive license, for any reason provided in Article 3 (commencing with Code  
14 section 2750) of the Nursing Practice Act.

15                   5.       This Petition to Revoke Probation is brought under the authority of Board  
16 Decision OAH Case No. N2003060016, which provides in pertinent part as follows:

17                                   **ORDER**

18                   The petition of Marguerite R. Long, also known as Marguerite Rose  
19 Pelletier and Marguerite Rose Pelletier Long, for reinstatement of her license is  
20 granted. A license shall be issued to petitioner. Said license shall immediately be  
revoked, the order of revocation stayed and petitioner placed on probation for a  
period of five (5) years on the following conditions:

21                   18.       If petitioner violates the conditions of her probation, the Board  
22 after giving the petitioner notice and an opportunity to be heard, may set aside the  
stay order and impose the stayed discipline (revocation/suspension) of petitioner's  
23 license.

24                   If during the period of probation, an accusation or petition to revoke  
25 probation has been filed against petitioner's license or the Attorney General's  
26 Office has been requested to prepare an accusation or petition to revoke probation  
against petitioner's license, the probationary period shall automatically be  
extended and shall not expire until the accusation or petition has been acted upon  
by the Board.

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7. Respondent has violated the conditions of her probation as set forth in the following paragraphs:

**(Failure to Comply with the Board's Probation Program)**

9. Respondent's probation is subject to revocation for failure to comply with Probation Condition 2, referenced above, in that Respondent failed to fully comply with probation terms and conditions 2, 13, 14 and 15.

**(Failure to Participate in a Treatment/Rehabilitation Program)**

Petitioner, at her expense, shall successfully complete during the probationary period or shall have successfully completed prior to commencement of probation a Board-approved treatment/rehabilitation program of at least six (6) months duration. As required, reports shall be submitted by the program on forms provided by the board. If petitioner has not completed a Board-approved treatment/rehabilitation program prior to commencement of probation, petitioner, within 45 days from the effective date of the decision, shall be enrolled in a program. If a program is not successfully completed within the first nine months of probation, the Board shall consider petitioner in violation of probation.

Based on Board recommendation, each week petitioner shall be required to attend at least one, but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) and a nurse support group as approved and directed by the Board. If a nurse support group is not available, an additional 12-step meeting or equivalent shall be added. Petitioner shall submit dated and signed documentation confirming such attendance to the Board during the entire period of probation. Petitioner shall continue with the recovery plan recommended by the treatment/rehabilitation program or a licensed mental health examiner and/or other ongoing recovery groups.



1                   11.     Respondent's probation is subject to revocation for failure to comply with  
2 Probation Condition 13, referenced above, in that Respondent failed to participate in a  
3 treatment/rehabilitation program.

4                                   **THIRD CAUSE TO REVOKE PROBATION**

5                                   **(Failure to Abstain From Mood Altering Drugs)**

6                   12.     At all times after the effective date of Respondent's probation, Probation  
7 Condition 14 stated:

8                                 Petitioner shall completely abstain from the possession, injection or  
9 consumption by any route of all psychotropic (mood altering) drugs, including  
10 alcohol, except when the same are ordered by a health care professional legally  
11 authorized to do so as part of documented medical treatment. Petitioner shall  
12 have sent to the Board, in writing and within fourteen (14) days, by the  
prescribing health professional, a report identifying the medication, dosage, the  
date the medication was prescribed, petitioner's prognosis, the date the medication  
will not longer be required, and the effect on the recovery plan, if appropriate.

13                                Petitioner shall identify for the Board a single physician, nurse practitioner  
14 or physician assistant who shall be aware of petitioner's history of substance  
15 abuse and will coordinate and monitor any prescriptions for petitioner for  
16 dangerous drugs, controlled substances or mood-altering drugs. The coordinating  
physician, nurse practitioner, or physician assistant shall report to the Board on a  
quarterly basis petitioner's compliance with this condition. If any substances  
considered addictive have been prescribed, the report shall identify a program for  
the time limited use of any such substances.

17                                The Board may require the single coordinating physician, nurse  
18 practitioner, or physician assistant to be a specialist in addictive medicine, or to  
consult with a specialist in addictive medicine.

19                   13.     Respondent's probation is subject to revocation for failure to comply with  
20 Probation Condition 14, referenced above, in that Respondent failed to abstain from mood  
21 altering drugs by her own admission of relapsing on or about June 7, 2004 through June 11,  
22 2004, August 14, 2004 through August 20, 2004 and on or about August of 2006 through  
23 September 28, 2006. Additionally, Respondent tested positive for narcotic drugs without a  
24 prescription on the following dates: February 26, 2007, February 23, 2007, January 18, 2007,  
25 October 12, 2006, July 31, 2006, April 25, 2006, April 13, 2006, March 24, 2006, February 22,  
26 2006, February 7, 2006, January 19, 2006, December 8, 2005, October 26, 2005, October 19,  
27 2005, January 4, 2005, December 6, 2004, July 29, 2004, March 8, 2004, January 21, 2004,  
28 January 6, 2004 and December 23, 2003.

1 **FOURTH CAUSE TO REVOKE PROBATION**

2 **(Failure to Submit to Tests and Samples)**

3 14. At all times after the effective date of Respondent's probation, Condition  
4 15 stated:

5 Petitioner, at her expense, shall participate in a random, biological fluid  
6 testing or a drug screening program which the Board approves. The length of  
7 time and frequency will be subject to approval by the Board. Petitioner is  
8 responsible for keeping the Board informed of Petitioner's current telephone  
9 number at all times. Petitioner shall also ensure that messages may be left at the  
telephone number when she is not available and ensure that reports are submitted  
directly by the testing agency to the Board, as directed. Any confirmed positive  
finding shall be reported immediately to the Board by the program and Petitioner  
shall be considered in violation of probation.

10 In addition, Petitioner, at any time during the period of probation, shall  
11 fully cooperate with the Board or its representatives, and shall, when requested,  
12 submit to such tests and samples as the Board or its representatives may require  
for the detection of alcohol, narcotics, hypnotics, dangerous drugs, or other  
controlled substances.

13 If Petitioner has a positive drug screen for any substance not legally  
14 authorized and not reported to the coordinating physician, nurse practitioner or  
physician assistant, and the Board files a petition to revoke probation or an  
15 accusation, the Board may suspend Petitioner from practice pending the final  
decision on the petition to revoke probation or the accusation. This period of  
suspension will not apply to the reduction of this probationary time period.

16  
17 15. Respondent's probation is subject to revocation for failure to comply with  
18 Probation Condition 15, referenced above, in that Respondent failed to submit to biological fluid  
19 testings on December 7, 2006, September 6, 2006, August 3, 2006, November 1, 2005 and  
20 June 14, 2004.

21 **PRAYER**

22 **WHEREFORE**, Complainant requests that a hearing be held on the matters  
23 herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

24 1. Revoking the probation that was granted by the Board of Registered  
25 Nursing in the Decision in OAH Case No. 2003060016 and imposing the disciplinary order that  
26 was stayed thereby revoking Registered Nurse License No. 217104 issued to Marguerite Rose  
27 Pelletier, also known as Marguerite Rose Pelletier Long; and

28 ///



EXHIBIT A

BEFORE THE  
BOARD OF REGISTERED NURSING  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Petition for  
Reinstatement of:

OAH No. N 2003060016

MARGUERITE R. LONG, aka  
MARGUERITE ROSE PELLETIER, aka  
MARGUERITE ROSE PELLETIER LONG  
9517 Vista Hills Place  
Lakeside, CA 92040

Registered Nurse License No. 217104

Respondent.

**DECISION**

The attached Decision of the Administrative Law Judge is hereby adopted by the Board of Registered Nursing as its Decision in the above-entitled matter.

This Decision shall become effective on August 30, 2003.

IT IS SO ORDERED this 31st day of July, 2003.

Dandra Erickson, CRNA  
President  
Board of Registered Nursing  
Department of Consumer Affairs  
State of California

BEFORE THE  
BOARD OF REGISTERED NURSING  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the Petition for Reinstatement  
of:

MARGUERITE R. LONG, aka  
MARGUERITE ROSE PELLETIER, aka  
MARGUERITE ROSE PELLETIER LONG  
9517 Viata Hills Place  
Lakeside, California 92040

Registered Nurse License No. 217104

Petitioner.

OAH No. N 2003060016

**DECISION**

This matter was heard before a quorum of the Board of Registered Nursing on June 12, 2003, in San Francisco, California. Board members present and participating were Sandra Erickson, C.R.N.A., President, LaFrancine Tate, Vice President, Grace Corse, R.N., Cynthia Johnson, Ed.D., R.N., Carmen Morales-Board, M.S.N, R.N., and Dan C. Weitzman, Public Member. Administrative Law Judge Cheryl R. Tompkin, State of California, Office of Administrative Hearings, presided.

Char Meaney, Deputy Attorney General, represented the Office of the Attorney General.

Petitioner Marguerite R. Long appeared on her own behalf.

This matter was submitted on June 12, 2003.

**FACTUAL FINDINGS**

1. On July 31, 1971, the Board of Registered Nursing (Board) issued registered nurse license number 217104 to Marguerite R. Long, also known as Marguerite Rose Pelletier and Marguerite Rose Pelletier Long (petitioner).

2. Effective June 16, 1997, pursuant to a default decision in Case No. 97-78, the Board revoked petitioner's license. Disciplinary action was taken pursuant to Business and

Professions Code sections 2761, subdivision (a) [unprofessional conduct] and 2762, subdivisions (a) [unlawful possession of a controlled substance] and (e) [making false, grossly incorrect, grossly inconsistent or unintelligible entries in drug records]. The Board found that during July and August 1994, while on duty in the critical care unit of a hospital, petitioner signed out Morphine Sulfate, a controlled substance for several patients, charted wastage of the drug, then obtained the charted wastage for her own use. It also found that petitioner failed to obtain a countersignature from a witness to the wastage of Morphine Sulfate; took Demerol, a controlled substance, from the hospital supply for her own use; obtained Demerol and Morphine Sulfate by improperly charting patient use of the drugs; possessed Demerol and Morphine Sulfate without having a prescription therefore; self-administered Morphine Sulfate and Demerol; signed out Ativan, a controlled substance, for a patient at a time that was out of sequence with preceding and subsequent entries, and signed out Demerol for a patient when the physician's order was for Morphine.

3. On or about October 14, 2002, petitioner filed the pending petition for reinstatement.

4. Petitioner began drinking and abusing alcohol at age 16. She began abusing Codeine in the early 1980's after being prescribed the drug for a back problem.<sup>1</sup> In 1987 she began a recovery program after her husband threatened to leave her and take their son. However, 1987 was the beginning of a downward spiral. In 1994 petitioner began diverting medications, resulting in revocation of her registered nurse license. In 1999 she had two driving under the influence of alcohol convictions and was placed on probation. Her husband eventually divorced her and friends and family began to avoid her. Petitioner testified that she abused drugs and alcohol to the point she lost everyone and everything and was living to take drugs and taking drugs to live. It was at that point she decided she was "tired of trying to kill [her]self" and that she wanted to "clean up."

On July 3, 2001, petitioner voluntarily admitted herself to the Escondido Community Sobering Services (ECSS) rehabilitation program. She resided at the program for 23 months, until February 2003, when she moved into an apartment with her brother. While living at the rehabilitation program petitioner began therapy and received medication for depression, which she continues to take. She also began attending Alcoholics Anonymous (AA) meetings. Petitioner attends 7 to 9 AA meetings a week, she has a sponsor and she is actively working the 12 step program. In August 2002 she began attending the Nurse to Nurse Support Group weekly. She has also regained her driver's license and her probation for driving under the influence was terminated in early 2003. Petitioner has been clear and sober for two years. She has a sobriety date of July 3, 2001.

4. Petitioner currently works as care provider for pets at ABC Veterinary Hospital in San Marcos, California. She has been employed at the Veterinary Hospital since

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<sup>1</sup> Petitioner has chronic back pain. To deal with the pain she has had several epidurals. She also receives physical therapy, follows an exercise program to strengthen her back and takes Motrin. She does not take narcotics. She will also begin seeing a pain management specialist in July 2003.

July 2001. She works 29 hours per week. Petitioner testified that her job has given her back some of her confidence and self esteem and has allowed her to pay restitution. After revocation of her nursing license and prior to obtaining her current position petitioner also worked as a shuttle driver, home health aide and theft prevention clerk. Petitioner is seeking reinstatement as a registered nurse because she loves nursing and ultimately hopes to work as a neonatal intensive care unit nurse.

5. Petitioner submitted nine (9) letters of reference in support of her petition from a variety of individuals who know her well and are aware of her efforts to maintain sobriety, including her psychiatrist, ECSS case manager, ECSS counselor, AA sponsor, Nurse to Nurse Support Group Director, employer and friends. The references generally confirm her sobriety and sincere efforts to move forward with her life, drug and alcohol free. However, in his letter petitioner's psychiatrist notes that "[w]ith regard to [petitioner's] return to the nursing profession, it would be prudent to say that she could be expected to do well, initially, in a work environment that was totally free of the access to medication or substances of abuse." Petitioner testified she is willing to work in a position where she does not have access to drugs, such as case management or triage.

6. The evidence presented demonstrated that petitioner has made great strides toward rehabilitation. She has demonstrated to the satisfaction of the Board that reinstatement of her license upon relevant probationary terms and conditions is warranted.

### LEGAL CONCLUSIONS

Petitioner has established that cause exists to reinstate her license as a registered nurse on a probationary basis and subject to certain terms and conditions. (Bus. & Prof. Code, § 2760; Gov. Code, § 11522.)

### ORDER

The petition of Marguerite R. Long, also known as Marguerite Rose Pelletier and Marguerite Rose Pelletier Long, for reinstatement of her license is granted. A license shall be issued to petitioner. Said license shall immediately be revoked, the order of revocation stayed and petitioner placed on probation for a period of five (5) years on the following conditions.

1. Petitioner shall obey all federal, state and local laws. A full and detailed account of any and all violations of law shall be reported by the petitioner to the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of compliance with this condition, petitioner shall submit completed fingerprint forms and fingerprint fees within forty-five (45) days of the effective date of this Decision, unless previously submitted as part of the licensure application process.



2. Petitioner shall fully comply with the conditions of the Probation Program established by the Board and cooperate with representatives of the Board in its monitoring and investigation of the petitioner's compliance with the Board's Probation Program. Petitioner shall inform the Board in writing within no more than fifteen (15) days of any address change and shall at all times maintain an active, current license status with the Board, including during any period of suspension.

3. Petitioner, during the period of probation, shall appear in person at interviews/meetings as directed by the Board or its designated representatives.

4. Periods of residency or practice as a registered nurse outside of California shall not apply toward a reduction of this probation time period. Petitioner's probation is tolled, if, and when she resides outside of California. The petitioner must provide written notice to the Board within fifteen (15) days of any change of residency or practice outside the state, and within thirty (30) days prior to re-establishing residency or returning to practice in this state.

Petitioner shall provide a list of all states and territories where she has ever been licensed as a registered nurse, vocational nurse, or practical nurse. Petitioner shall further provide information regarding the status of each license and any changes in such license status during the term of probation. Petitioner shall inform the Board if she applies for or obtains a new nursing license during the term of probation.

5. Petitioner, during the period of probation, shall submit or cause to be submitted such written reports/declarations and verification of actions under penalty of perjury, as required by the Board. These reports/declarations shall contain statements relative to petitioner's compliance with all the conditions of the Board's Probation Program. Petitioner shall immediately execute all release of information forms as may be required by the Board or its representatives.

Petitioner shall provide a copy of this decision to the nursing regulatory agency in every state and territory in which she has a registered nurse license.

6. Petitioner, during the period of probation, shall engage in the practice of registered nursing in California for a minimum of twenty-four (24) hours per week for six (6) consecutive months or as determined by the Board.

For purposes of compliance with this section, "engage in the practice of registered nursing" may include, when approved by the Board, volunteer work as a registered nurse, or work in any non-direct patient care position that requires licensure as a registered nurse.

The Board may require that advanced practice nurses engage in advanced practice nursing for a minimum of twenty-four (24) hours per week for six (6) consecutive months or as determined by the Board.

If petitioner has not complied with this condition during the probationary term, and the petitioner has presented sufficient documentation of her good faith efforts to comply with this condition, and, if no other conditions have been violated, the Board, in its discretion, may grant an extension of the petitioner's probation period up to one (1) year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply.

7. Petitioner shall obtain prior approval from the Board before commencing or continuing any employment, paid or voluntary, as a registered nurse. Petitioner shall cause to be submitted to the Board all performance evaluations and other employment related reports as a registered nurse upon request of the Board.

Petitioner shall provide a copy of this decision to her employer and immediate supervisor prior to commencement of any nursing or other health care related employment.

In addition to the above, petitioner shall notify the Board in writing within seventy-two (72) hours after she obtains any nursing or other health care related employment. Petitioner shall notify the Board in writing within seventy-two (72) hours after she is terminated or separated, regardless of cause, from any nursing, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.

8. Petitioner shall obtain prior approval from the Board regarding petitioner's level of supervision and/or collaboration before commencing or continuing any employment as a registered nurse, or education and training that includes patient care.

Petitioner shall practice only under the direct supervision of a registered nurse in good standing (no current discipline) with the Board of Registered Nursing, unless alternative methods of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are approved.

Petitioner's level of supervision and/or collaboration may include, but is not limited to, the following:

- a. Maximum - The individual providing supervision and/or collaboration is present in the patient care area or in any other work setting at all times.
- b. Moderate - The individual providing supervision and/or collaboration is in the patient care unit or in any other work setting at least half the hours petitioner works.
- c. Minimum - The individual providing supervision and/or collaboration has person-to-person communication with petitioner at least twice during each shift worked.

- d. Home Health Care - If petitioner is approved to work in the home health care setting, the individual providing supervision and/or collaboration shall have person-to-person communication with petitioner as required by the Board each work day. Petitioner shall maintain telephone or other telecommunication contact with the individual providing supervision and/or collaboration as required by the Board during each work day. The individual providing supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to patients' homes visited by petitioner with or without petitioner present.

9. Petitioner shall not work for a nurse's registry, in any private duty position as a registered nurse, for a temporary nurse placement agency, as a traveling nurse or for an in-house nursing pool.

Petitioner shall not work for a licensed home health agency as a visiting nurse unless the registered nursing supervision and other protections for home visits have been approved by the Board. Petitioner shall not work in any other registered nursing occupation where home visits are required.

Petitioner shall not work in any health care setting as a supervisor of registered nurses. The Board may additionally restrict petitioner from supervising licensed vocational nurses and/or unlicensed assistive personnel on a case-by-case basis.

Petitioner shall not work as a faculty member in an approved school of nursing or as an instructor in a Board approved continuing education program.

Petitioner shall work only on a regularly assigned, identified and predetermined worksite(s) and shall not work in a float capacity.

If petitioner works or intends to work in excess of forty (40) hours per week, the Board may request documentation to determine whether there should be restrictions on the hours of work.

10. Petitioner, at her own expense, shall enroll and successfully complete a refresher course and such other course(s) relevant to the practice of registered nursing as may be designated by the Board no later than six (6) months prior to the end of her probationary term.

Petitioner shall obtain prior approval from the Board before enrolling in the course(s). Petitioner shall submit to the Board the original transcripts or certificates of completion for the above required course(s). The Board shall return the original documents to petitioner after photocopying them for its records.

11. Petitioner shall pay to the Board costs associated with its investigation and enforcement pursuant to Business and Professions Code Section 125.3 in the amount of three

thousand dollars (\$3,000.00). Petitioner shall be permitted to pay these costs in a payment plan approved by the Board, with payments to be completed no later than three months prior to the end of the probation term.

12. Within forty-five (45) days of the effective date of this decision, petitioner, at her expense, shall have a licensed physician, nurse practitioner, or physician assistant, who is approved by the Board before the assessment is performed, submit an assessment of petitioner's physical condition and capability to perform the duties of a registered nurse. Such an assessment shall be submitted in a format acceptable to the Board. If medically determined, a recommended treatment program will be instituted and followed by petitioner with the physician, nurse practitioner, or physician assistant providing written reports to the Board on forms provided by the Board.

If petitioner is determined to be unable to practice safely as a registered nurse, the licensed physician, nurse practitioner, or physician assistant making this determination shall immediately notify the Board and petitioner by telephone, and the Board shall request that the Attorney General's Office prepare an accusation or petition to revoke probation. Petitioner shall immediately cease practice and shall not resume practice until notified by the Board. During this period of suspension, petitioner shall not engage in any practice for which a license issued by the Board is required until the Board has notified petitioner that a medical determination permits petitioner to resume practice. This period of suspension will not apply to the reduction of this probationary time period.

If petitioner fails to have the above assessment submitted to the Board within the forty-five (45) day requirement, petitioner shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by petitioner to obtain the assessment, and a specific date for compliance must be provided.

13. Petitioner, at her expense, shall successfully complete during the probationary period or shall have successfully completed prior to commencement of probation a Board-approved treatment/rehabilitation program of at least six (6) months duration. As required, reports shall be submitted by the program on forms provided by the Board. If petitioner has not completed a Board-approved treatment/rehabilitation program prior to commencement of probation, petitioner, within forty-five (45) days from the effective date of this decision, shall be enrolled in a program. If a program is not successfully completed within the first nine (9) months of probation, the Board shall consider petitioner in violation of probation.

Based on Board recommendation, each week petitioner shall be required to attend at least one but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) and a nurse support group as approved and directed by the Board. If a nurse support group is not available, an additional 12-step meeting or equivalent shall be added. Petitioner shall submit dated and signed

documentation confirming such attendance to the Board during the period of probation. Petitioner shall continue with the recovery plan recommended by the treatment/rehabilitation program or a licensed mental health examiner and/or other ongoing recovery groups.

14. Petitioner shall completely abstain from the possession, injection or consumption by any route of all psychotropic (mood altering) drugs, including alcohol, except when the same are ordered by a health care professional legally authorized to do so as part of documented medical treatment. Petitioner shall have sent to the Board, in writing and within fourteen (14) days, by the prescribing health professional, a report identifying the medication, dosage, the date the medication was prescribed, petitioner's prognosis, the date the medication will no longer be required, and the effect on the recovery plan, if appropriate.

Petitioner shall identify for the Board a single physician, nurse practitioner or physician assistant who shall be aware of petitioner's history of substance abuse and will coordinate and monitor any prescriptions for petitioner for dangerous drugs, controlled substances or mood-altering drugs. The coordinating physician, nurse practitioner, or physician assistant shall report to the Board on a quarterly basis petitioner's compliance with this condition. If any substances considered addictive have been prescribed, the report shall identify a program for the time limited use of any such substances.

The Board may require the single coordinating physician, nurse practitioner, or physician assistant to be a specialist in addictive medicine, or to consult with a specialist in addictive medicine.

15. Petitioner, at her expense, shall participate in a random, biological fluid testing or a drug screening program which the Board approves. The length of time and frequency will be subject to approval by the Board. Petitioner is responsible for keeping the Board informed of petitioner's current telephone number at all times. Petitioner shall also ensure that messages may be left at the telephone number when she is not available and ensure that reports are submitted directly by the testing agency to the Board, as directed. Any confirmed positive finding shall be reported immediately to the Board by the program and shall be considered a violation of probation.

In addition, petitioner, at any time during the period of probation, shall fully cooperate with the Board or any of its representatives, and shall, when requested, submit to such tests and samples as the Board or its representatives may require for the detection of alcohol, narcotics, hypnotics, dangerous drugs, or other controlled substances.

If petitioner has a positive drug screen for any substance not legally authorized and not reported to the coordinating physician, nurse practitioner, or physician assistant, and the Board files a petition to revoke probation or an accusation, the Board may suspend petitioner from practice pending the final decision on the petition to revoke probation or the accusation. This period of suspension will not apply to the reduction of this probationary time period.

16. Petitioner shall, within forty-five (45) days of the effective date of this decision, have a mental health examination including psychological testing as appropriate to determine her capability to perform the duties of a registered nurse. The examination will be performed by a psychiatrist, psychologist or other licensed mental health practitioner approved by the Board. The examining mental health practitioner shall submit a written report of that assessment and recommendations to the Board. All costs are the responsibility of the petitioner. Recommendations for treatment, therapy or counseling made as a result of the mental health examination will be instituted and followed by petitioner.

If petitioner is determined to be unable to practice safely as a registered nurse, the licensed mental health care practitioner making this determination shall immediately notify the Board and petitioner by telephone and the Board shall request that the Attorney General's Office prepare an accusation or petition to revoke probation. Petitioner shall immediately cease practice and may not resume practice until notified by the Board. During the period of suspension, petitioner shall not engage in any practice for which a license issued by the Board is required, until the Board has notified petitioner that a mental health determination permits petitioner to resume practice. This period of suspension will not apply to the reduction of this probationary period.

If petitioner fails to have the above assessment submitted to the Board within the forty-five (45) day requirement, petitioner shall immediately cease practice and shall not resume practice until notified by the Board. This period of suspension will not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by petitioner to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

17. Petitioner, at her expense, shall participate in an on-going counseling program until such time as the Board releases him/her from this requirement and only upon the recommendation of the counselor. Written progress reports from the counselor shall be required at various intervals.

18. If petitioner violates the conditions of her probation, the Board after giving petitioner notice and an opportunity to be heard, may set aside the stay order and impose the stayed discipline (revocation/suspension) of petitioner's license.

If during the period of probation, an accusation or petition to revoke probation has been filed against petitioner's license or the Attorney General's Office has been requested to prepare an accusation or petition to revoke probation against petitioner's license, the probationary period shall automatically be extended and shall not expire until the accusation or petition to revoke probation has been acted upon by the Board.

19. During petitioner's term of probation, if she ceases practicing due to, retirement, health reason or is otherwise unable to satisfy the conditions of probation,

petitioner may surrender her license to the Board. The Board reserves the right to evaluate petitioner's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances, without further hearing. Upon formal acceptance of the tendered license and wall certificate, petitioner will no longer be subject to the conditions of probation.


Surrender of petitioner's license will be considered a disciplinary action and shall become a part of petitioner's license history with the Board. A registered nurse whose license has been surrendered may petition the Board for reinstatement no sooner than the following minimum periods from the effective date of the disciplinary decision:

- a. Two years for reinstatement of a license that was surrendered for any reason other than a mental or physical illness; or
- b. One year for a license surrendered for a mental or physical illness.

Each condition of probation contained herein is a separate and distinct condition. If any condition of this Order, or any application thereof, is declared unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other applications thereof, shall not be affected. Each term condition of this Order shall separately be valid and enforceable to the fullest extent permitted by law.

Upon successful completion of probation, petitioner's license shall be fully restored.

DATED: 7/31/03

  
SANDRA ERICKSON, C.R.N.A.  
President  
Board of Registered Nursing  
State of California

In the Matter of the Accusation  
Against:

DEFAULT DECISION  
AND ORDER

Registered Nurse License No. 217104,  
Respondent.

1.



1 by section 11506 of said Code, and the default of respondent  
2 having been duly noted, the Board of Registered Nursing ("Board")  
3 has determined that respondent has waived her rights to a hearing  
4 to contest the merits of said Accusation; that respondent is in  
5 default, and that the Board will take action on the Accusation  
6 and evidence herein without a hearing, and makes the following  
7 findings of fact:

8 FINDINGS OF FACT

9 1. The Accusation was made and filed by Ruth Ann  
10 Terry, R.N., M.P.H., in her official capacity as the Board's  
11 Executive Officer.

12 2. On July 31, 1971, the Board issued registered  
13 nurse license number 217104 to Marguerite Rose Pelletier, with a  
14 subsequent name change to Marguerite R. Long, also known as  
15 Marguerite Rose Pelletier Long. The license was in full force  
16 and effect at all times pertinent herein and has been renewed  
17 through August 31, 1997.

18 3. Under Business and Professions Code section 2750,  
19 the Board may discipline any licensee, including a licensee  
20 holding a temporary or an inactive license, for any reason  
21 provided in Article 3 of the Nursing Practice Act.

22 4. Respondent has subjected her license to discipline  
23 under Business and Professions Code section 2761(a) in that,  
24 while on duty as a registered nurse assigned to the 7:00 p.m to  
25 7:00 a.m. shift in the Critical Care Unit at Santa Paula Hospital  
26 in Santa Paula, California, she was guilty of unprofessional  
27 conduct in the following respects:

1           a.    On July 29, 1994, she failed to obtain a counter-  
2 signature from a witness to the wastage of 5 mg. of Morphine  
3 Sulfate, a controlled substance, which had been signed out, at  
4 7:15 p.m., on the hospital's 24-Hour Controlled Substance  
5 Administration Record for patient W.F.

6           b.    Between the approximate period of July 29, 1994  
7 through August 14, 1994, she, by her own admission, unlawfully  
8 took an unknown amount of Demerol, a controlled substance, and  
9 Morphine Sulfate, a controlled substance, from the hospital  
10 supply, for her own use.

11           5.    Respondent has subjected her license to discipline  
12 under Business and Professions Code section 2761(a) on the  
13 grounds of unprofessional conduct, as defined by section 2762(a)  
14 of that code, in that between the approximate period of July 29,  
15 1994 through August 14, 1994, while on duty as a registered nurse  
16 assigned to the 7:00 p.m to 7:00 a.m. shift in the Critical Care  
17 Unit at Santa Paula Hospital in Santa Paula, California, she, by  
18 her own admission, did the following:

19           a.    She obtained an unknown amount of Demerol, a  
20 controlled substance, and Morphine Sulfate, a controlled  
21 substance, by fraud, deceit, misrepresentation, subterfuge, or by  
22 concealment of a material fact in violation of Health and Safety  
23 Code section 11173(a), by unlawfully taking the drugs from the  
24 hospital supply for her own use.

25           b.    She possessed an unknown amount of Demerol, a  
26 controlled substance, and Morphine Sulfate, a controlled

27   / / /

1 substance, in violation of Business and Professions Code section  
2 4230 in that she did not have a prescription therefor.

3 c. She self-administered an unknown amount of  
4 Demerol, a controlled substance, and Morphine Sulfate, a  
5 controlled substance, without having lawful authority therefor.

6 6. Respondent has subjected her license to discipline  
7 under Business and Professions Code section 2761(a) on the  
8 grounds of unprofessional conduct, as defined in section 2762(e)  
9 of that code, in that while on duty as a registered nurse  
10 assigned to the 7:00 p.m to 7:00 a.m. shift in the Critical Care  
11 Unit at Santa Paula Hospital in Santa Paula, California, she  
12 falsified, made grossly incorrect, and grossly inconsistent  
13 entries in hospital and patient records in the following  
14 respects:

15 Patient W. F.

16 a. On July 29, 1994, respondent falsified hospital  
17 and patient records by signing out, at 7:15 p.m., on the  
18 hospital's 24-Hour Controlled Substance Administration Record,  
19 10 mg. of Morphine Sulfate, a controlled substance, for patient  
20 W. F., charting the wastage of 5 mg. of the drug, when, in fact,  
21 she, by her own admission, obtained the 5 mg. of the drug, which  
22 she indicated had been wasted, for her own use.

23 b. On July 29, 1994, respondent made grossly  
24 inconsistent entries in hospital and patient records by signing  
25 out, at 7:15 p.m., on the hospital's 24-Hour Controlled Substance  
26 Administration Record, 10 mg. of Morphine Sulfate, a controlled  
27 substance, for patient W. F., charting the wastage of 5 mg. of

1 the drug, failing to obtain a counter-signature from a witness  
2 for the wastage, and failing to chart the administration of 5 mg.  
3 of the drug on the patient's medication chart.

4 c. On July 29, 1994, at 10:30 a.m., at a time which  
5 is out of sequence with the preceding and subsequent entries,  
6 respondent signed out on the hospital's 24-Hour Controlled  
7 Substance Administration Record, 0.5 mg. of Ativan, a controlled  
8 substance, for patient W. F.

9 Patient M.T

10 d. On July 30, 1994, respondent falsified hospital  
11 and patient records by signing out, at 5:45 p.m., on the  
12 hospital's 24-Hour Controlled Substance Administration Record,  
13 300 mg. of Demerol, a controlled substance, for patient M. T.,  
14 and charting on the patient's controlled anesthesia flow sheet  
15 that 18 cc (180 mg.) was left in the syringe (indicating that the  
16 patient would have received 120 mg. of Demerol) when, in fact,  
17 she, by her own admission, obtained an unknown amount of the drug  
18 for her own use.

19 Patient M. K.

20 e. On August 1, 1994, at 4:00 a.m., respondent signed  
21 out on the hospital's 24-Hour Controlled Substance Administration  
22 Record, 300 mg. of Demerol, a controlled substance, for patient  
23 M. K., when the physician's order was for Morphine, a controlled  
24 substance, to be administered to the patient.

25 Patient M. C.

26 f. On August 14, 1994, respondent falsified hospital  
27 and patient records by signing out, at 8:00 p.m., for 30 mg. of

1 Morphine Sulfate, a controlled substance, and at 12:00 midnight,  
2 for 30 mg. of the drug, on the hospital's 24-Hour Controlled  
3 Substance Administration Record, for patient M. C., and charting  
4 on the patient's controlled anesthesia flow sheet that 6 mg. of  
5 the drug was left in the syringe when, in fact, she, by her own  
6 admission, obtained an unknown amount of the drug for her own  
7 use.

8 g. On August 15, 1994, respondent falsified hospital  
9 and patient records by signing out, at 4:00 a.m., for 30 mg. of  
10 Morphine Sulfate, a controlled substance, on the hospital's  
11 24-Hour Controlled Substance Administration Record, for patient  
12 M. C., and charting on the patient's controlled anesthesia flow  
13 sheet that 15 mg. of the drug was left in the syringe when, in  
14 fact, she, by her own admission, obtained an unknown amount of  
15 the drug for her own use.

#### 16 DETERMINATION OF ISSUES

17 Based on the foregoing Findings of Fact, respondent has  
18 subjected her license to discipline under Business and  
19 Professions Code sections 2761(a) (general unprofessional  
20 conduct) and 2761(a) on the grounds of unprofessional conduct, as  
21 defined by sections 2762(a) and 2762(e) of that code.

#### 22 ORDER

23 WHEREFORE, for the aforesaid causes, the Board of  
24 Registered Nursing makes its order revoking registered nurse  
25 license number 217104, issued to Marguerite R. Long, also known  
26 as Marguerite Rose Pelletier and Marguerite Rose Pelletier Long.

27 / / /

1 Respondent shall not be deprived of making any further  
2 showing by way of mitigation. However, such showing must be made  
3 to the Board at 400 R Street, Suite 4030, Sacramento, California  
4 95814 prior to the effective date of this Order.

5 This Order shall become effective on the 16th day of  
6 June, 1997.

7 Dated and signed this 16th day of May,  
8 1997.

9 BOARD OF REGISTERED NURSING  
10 DEPARTMENT OF CONSUMER AFFAIRS  
11 STATE OF CALIFORNIA

12   
13 PRESIDENT

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27 03579-110-LA96AD2301  
(PAW 3/26/97)

1 DANIEL E. LUNGREN, Attorney General  
of the State of California  
2 STEPHEN S. HANDIN, State Bar No. 71100  
Deputy Attorney General  
3 300 South Spring Street, Suite 500  
Los Angeles, California 90013  
4 Telephone: (213) 897-2538

5 Attorneys for Complainant

6  
7  
8 BEFORE THE  
9 BOARD OF REGISTERED NURSING  
DEPARTMENT OF CONSUMER AFFAIRS  
10 STATE OF CALIFORNIA

11 In the Matter of the Accusation )  
Against: )

NO. 97-78

12 MARGUERITE R. LONG, aka )  
13 MARGUERITE ROSE PELLETIER, aka )  
MARGUERITE ROSE PELLETIER LONG )  
14 201 West Vineyard Avenue, No. 30 )  
Oxnard, CA 93030 )

ACCUSATION

15 Registered Nurse License No. 217104, )  
16 Respondent. )  
17 )

18 Ruth Ann Terry, R.N., M.P.H., for causes for  
19 discipline, alleges:  
20

21 1. Complainant Ruth Ann Terry, R.N., M.P.H., makes  
22 and files this accusation in her official capacity as Executive  
23 Officer, Board of Registered Nursing, Department of Consumer  
24 Affairs.  
25

26 2. On July 31, 1971, the Board of Registered Nursing  
27 issued registered nurse license number 217104 to Marguerite Rose

1 Pelletier, with a subsequent name change to Marguerite R. Long,  
2 also known as Marguerite Rose Pelletier Long. The license was in  
3 full force and effect at all times pertinent herein and has been  
4 renewed through August 31, 1997.

5

6 3. Under Business and Professions Code section 2750,  
7 the Board of Registered Nursing may discipline any licensee,  
8 including a licensee holding a temporary or an inactive license,  
9 for any reason provided in Article 3 of the Nursing Practice Act.

10 Under Business and Professions Code section 125.3, the  
11 Board may request the administrative law judge to direct a  
12 licensee found to have committed a violation or violations of  
13 the licensing act to pay a sum not to exceed the reasonable costs  
14 of the investigation and enforcement of the case.

15

16 4. DRUGS

17 "Ativan," a brand of lorazepam, is a Schedule IV  
18 controlled substance as designated by Health and Safety Code  
19 section 11057(d)(12).

20 "Demerol," a brand of meperidine hydrochloride, a  
21 derivative of pethidine, is a Schedule II controlled substance as  
22 designated by Health and Safety Code section 11055(c)(17).

23 "Morphine/Morphine Sulfate" is a Schedule II controlled  
24 substance as designated by Health and Safety Code section  
25 11055(b)(1)(M).

26 / / /

27 / / /



1           5.    Respondent has subjected her license to discipline  
2 under Business and Professions Code section 2761(a) in that,  
3 while on duty as a registered nurse assigned to the 7:00 p.m to  
4 7:00 a.m. shift in the Critical Care Unit at Santa Paula Hospital  
5 in Santa Paula, California, she was guilty of unprofessional  
6 conduct in the following respects:

7           a.    On July 29, 1994, she failed to obtain a counter-  
8 signature from a witness to the wastage of 5 mg. of Morphine  
9 Sulfate, a controlled substance, which had been signed out, at  
10 7:15 p.m., on the hospital's 24-Hour Controlled Substance  
11 Administration Record for patient W.F.

12           b.    Between the approximate period of July 29, 1994  
13 through August 14, 1994, she, by her own admission, unlawfully  
14 took an unknown amount of Demerol, a controlled substance, and  
15 Morphine Sulfate, a controlled substance, from the hospital  
16 supply, for her own use.

17  
18           6.    Respondent has subjected her license to discipline  
19 under Business and Professions Code section 2761(a) on the  
20 grounds of unprofessional conduct, as defined by section 2762(a)  
21 of that code, in that between the approximate period of July 29,  
22 1994 through August 14, 1994, while on duty as a registered nurse  
23 assigned to the 7:00 p.m to 7:00 a.m. shift in the Critical Care  
24 Unit at Santa Paula Hospital in Santa Paula, California, she, by  
25 her own admission, did the following:

26           a.    She obtained an unknown amount of Demerol, a  
27 controlled substance, and Morphine Sulfate, a controlled

1 substance, by fraud, deceit, misrepresentation, subterfuge, or by  
2 concealment of a material fact in violation of Health and Safety  
3 Code section 11173(a), by unlawfully taking the drugs from the  
4 hospital supply for her own use.

5           b. She possessed an unknown amount of Demerol, a  
6 controlled substance, and Morphine Sulfate, a controlled  
7 substance, in violation of Business and Professions Code section  
8 4230 in that she did not have a prescription therefor.

9           c. She self-administered an unknown amount of  
10 Demerol, a controlled substance, and Morphine Sulfate, a  
11 controlled substance, without having lawful authority therefor.

12  
13           7. Respondent has subjected her license to discipline  
14 under Business and Professions Code section 2761(a) on the  
15 grounds of unprofessional conduct, as defined in section 2762(e)  
16 of that code, in that while on duty as a registered nurse  
17 assigned to the 7:00 p.m to 7:00 a.m. shift in the Critical Care  
18 Unit at Santa Paula Hospital in Santa Paula, California, she  
19 falsified, made grossly incorrect, and grossly inconsistent  
20 entries in hospital and patient records in the following  
21 respects:

22           Patient W. F.

23           a. On July 29, 1994, respondent falsified hospital  
24 and patient records by signing out, at 7:15 p.m., on the  
25 hospital's 24-Hour Controlled Substance Administration Record,  
26 10 mg. of Morphine Sulfate, a controlled substance, for patient  
27 W. F., charting the wastage of 5 mg. of the drug, when, in fact,

1 she, by her own admission, obtained the 5 mg. of the drug, which  
2 she indicated had been wasted, for her own use.

3 b. On July 29, 1994, respondent made grossly  
4 inconsistent entries in hospital and patient records by signing  
5 out, at 7:15 p.m., on the hospital's 24-Hour Controlled Substance  
6 Administration Record, 10 mg. of Morphine Sulfate, a controlled  
7 substance, for patient W. F., charting the wastage of 5 mg. of  
8 the drug, failing to obtain a counter-signature from a witness  
9 for the wastage, and failing to chart the administration of 5 mg.  
10 of the drug on the patient's medication chart.

11 c. On July 29, 1994, at 10:30 a.m., at a time which  
12 is out of sequence with the preceding and subsequent entries,  
13 respondent signed out on the hospital's 24-Hour Controlled  
14 Substance Administration Record, 0.5 mg. of Ativan, a controlled  
15 substance, for patient W. F.

16 Patient M.T

17 d. On July 30, 1994, respondent falsified hospital  
18 and patient records by signing out, at 5:45 p.m., on the  
19 hospital's 24-Hour Controlled Substance Administration Record,  
20 300 mg. of Demerol, a controlled substance, for patient M. T.,  
21 and charting on the patient's controlled anesthesia flow sheet  
22 that 18 cc (180 mg.) was left in the syringe (indicating that the  
23 patient would have received 120 mg. of Demerol) when, in fact,  
24 she, by her own admission, obtained an unknown amount of the drug  
25 for her own use.

26 / / /

27 / / /

1                   Patient M. K.

2                   e.    On August 1, 1994, at 4:00 a.m., respondent signed  
3 out on the hospital's 24-Hour Controlled Substance Administration  
4 Record, 300 mg. of Demerol, a controlled substance, for patient  
5 M. K., when the physician's order was for Morphine, a controlled  
6 substance, to be administered to the patient.

7                   Patient M. C.

8                   f.    On August 14, 1994, respondent falsified hospital  
9 and patient records by signing out, at 8:00 p.m., for 30 mg. of  
10 Morphine Sulfate, a controlled substance, and at 12:00 midnight,  
11 for 30 mg. of the drug, on the hospital's 24-Hour Controlled  
12 Substance Administration Record, for patient M. C., and charting  
13 on the patient's controlled anesthesia flow sheet that 6 mg. of  
14 the drug was left in the syringe when, in fact, she, by her own  
15 admission, obtained an unknown amount of the drug for her own  
16 use.

17                  g.    On August 15, 1994, respondent falsified hospital  
18 and patient records by signing out, at 4:00 a.m., for 30 mg. of  
19 Morphine Sulfate, a controlled substance, on the hospital's  
20 24-Hour Controlled Substance Administration Record, for patient  
21 M. C., and charting on the patient's controlled anesthesia flow  
22 sheet that 15 mg. of the drug was left in the syringe when, in  
23 fact, she, by her own admission, obtained an unknown amount of  
24 the drug for her own use.

25   /   /   /

26   /   /   /

27   /   /   /

WHEREFORE, complainant prays that a hearing be held and that the Board of Registered Nursing make its order:

1. Revoking or suspending registered nurse license number 217104, issued to Marguerite R. Long, also known as Marguerite Rose Pelletier and Marguerite Rose Pelletier Long.

2. Ordering Marguerite R. Long to pay to the Board its costs in investigating and enforcing the case according to proof at the hearing, pursuant to Business and Professions Code section 125.3.

3. Taking such other and further action as may be deemed proper and appropriate.

DATED: Jul-18, 1997

Ruth Ann Terry  
RUTH ANN TERRY, R.N., M.P.H.  
Executive Officer  
Board of Registered Nursing  
Department of Consumer Affairs  
State of California

Complainant